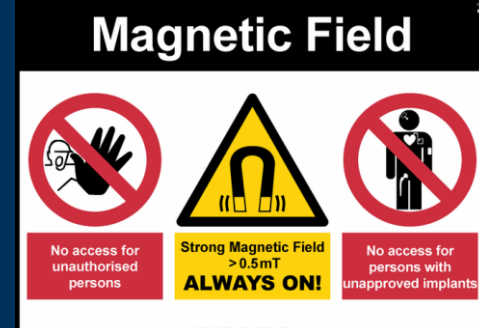




MRI SAFETY WEEK 2026

27-31 luglio 2026



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Gemelli



Marino Gentile – Ada Guidi

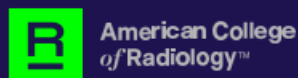
lug. '26

Ver. 1.2



Fondazione Policlinico Universitario Agostino Gemelli IRCCS
Università Cattolica del Sacro Cuore



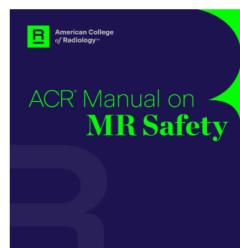


ACR® Manual on MR Safety

ACR Committee on MR Safety
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AMERICAN COLLEGE OF RADIOLOGY
1632 PRESTON WHITE DRIVE
RESTON, VA 20191

<https://www.acr.org/Clinical-Resources/Clinical-Tools-and-Reference/radiology-safety/mr-safety>



ACR Manual on MR Safety

ACR Manual on MR Safety 2026 Now Available

The 2026 Manual on MR Safety is now available to download. The manual builds on prior editions and includes substantial new content and safety recommendations as well as addresses new challenges that face contemporary MR practices.

The manual is intended for use by MR practitioners, technologists, medical physicists, administrators and other healthcare professionals.

Download

Summary of changes



2026

<https://www.variodyne.it/risonanza-magnetica/lezioni-rm-aa/>



Lezioni RM

2 – MRI – Sicurezza

2026-2027

https://www.ismrm.org/mr-safety-links/mr-safety-week-2026/?fbclid=IwT01FWASg9WtleHRuA2FlbQlxMABzcnRjBmFwcF9pZAwzNTA DU1MzE3MjgAAR7KFFksaT4f1UNU8seve4e2TfJeXlc7Ql5W9hob7iXaF1xwQ9w6 TBF3pcXR_A_aem_qK2p29PU_HT20gSVjRo0EQ

— INTERNATIONAL SOCIETY FOR —
ISMRM
MAGNETIC RESONANCE IN MEDICINE

About ▾ Annual Meetings ▾ Events ▾ Resources ▾ Careers ▾ Donate ▾ ISMRT

MR Safety Week 2026

Remember, MR Safety is within our control and our greatest responsibility.



The last week in July is universally recognized as **MR Safety Week**, inspired by the anniversary and 2001 tragic MRI-related death of Michael Colombini, age 6, resulting from a steel oxygen cylinder being brought into the MRI room during his exam ^{1, 2, 3}. The initial goal of this week was to prevent such a tragedy from happening again and has expanded into a week-long event giving us a chance to refresh our safety education and highlight some of the issues we all face in the MR environment.

MR Safety is an important part of our lives, and education is the cornerstone of a safe MR workplace. The ISMRT safety committee, in support and recognition of this event, has [compiled a variety of resources](#) to remind us to check our site procedures to ensure we follow best practices. This year, we offer a series of virtual meetings on a variety of aspects of safety in the MR workplace.

Registration includes access to each virtual meeting throughout the week. You are not obligated to participate every day, only the days you wish. Accreditation will be offered based on attendance at each live virtual event.

Register Now

https://online.ismrm.org/ismrmssa/f?p=STDSSA:LOGIN_DESKTOP:2573408246287::NO::::

Welcome to ISMRT's
MR Safety Week 2026
Virtual Meetings

[Register Now](#)

These virtual meetings are free and offer credit during the week of 27 – 31 July 2026. A new virtual meeting will be presented each day, offering a maximum of 1.0 hour of *AMA PRA Category 1 Credit™* and Category A Credit.

Members and visitors can earn credits for attending these virtual meetings by [logging in](#) and registering for the virtual meeting. Non-members can attend the virtual meeting for free and attain credit, but must have an ismrm.org account. [Create a new account here](#). Recordings of the events will only be available to members.



Target Audience

All professions involved that need to have knowledge about MR safety.

Learning Objectives

Upon completion of this activity, participants should be able to:

- Improve patient safety for an increased number of cases;
- Improve instructions for safe use of devices in the MR setting;
- Describe the physics of MR safety; and
- Improve the culture assuring MR safety in their own institution.



Claiming Credit

To obtain your credit for the meeting, log in to the ISMRM membership portal at ismrm.org, click the **[Meeting Evaluations]** menu button, find this meeting in the list that appears, click “Begin Evaluation” and follow the instructions provided.

Certificate of Participation

To obtain your Certificate of Participation after the meeting has ended, log in to the ISMRM membership portal at ismrm.org, click the **[Meeting Evaluations]** menu button, find this meeting in the list that appears, click “Begin Evaluation” and follow the instructions provided.

MONDAY

27 July 2026 at 20:00 UTC
Your Local Time: 27 July 2026 at 22:00 CEST

Moderators:

TBA

Overview:

ISMRT Safety Week's daily sessions are open to all registered individuals and feature gaming activities. Most topics cover all skill levels.

Program:

Introduction of and MR Safety Insights from the FDA MAUDE Database

TBA

Can We Trust AI?

TBA

TUESDAY

28 July 2026 at 20:00 UTC
Your Local Time: 28 July 2026 at 22:00 CEST

Moderators:

TBA

Overview:

ISMRT Safety Week's daily sessions are open to all registered individuals and feature gaming activities. Most topics cover all skill levels.

Program:

Managing Patients with Unlabeled Passive Implants on MR Systems Operating Below 1.5 T (+article)

TBA

How To Motivate Radiologists To Learn More About MR Safety

TBA

WEDNESDAY

29 July 2026 at 20:00 UTC
Your Local Time: 29 July 2026 at 22:00 CEST

Moderators:

TBA

Overview:

ISMRT Safety Week's daily sessions are open to all registered individuals and feature gaming activities. Most topics cover all skill levels.

Program:

Quench and Buttonology: The Poster

TBA

Remote Scanning and the New MRST

TBA

THURSDAY

30 July 2026 at 20:00 UTC
Your Local Time: 30 July 2026 at 22:00 CEST

Moderators:

TBA

Overview:

ISMRT Safety Week's daily sessions are open to all registered individuals and feature gaming activities. Most topics cover all skill levels.

Program:

Locked Out: The Hidden Hazards of MRI Doors

TBA

Experiences of Fire Incidents in MRI Departments

TBA



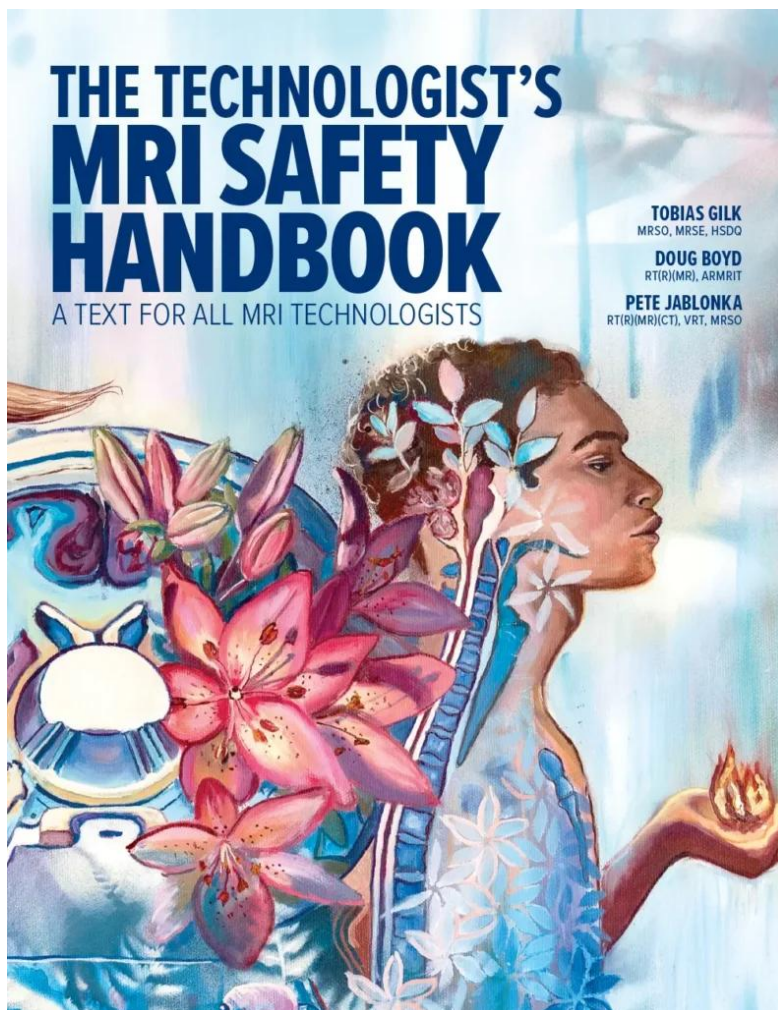
FRIDAY

31 July 2026 at 20:00 UTC
Your Local Time: 31 July 2026 at 22:00 CEST

Moderators:
TBA

Overview:
This session will serve as the Q&A for the entire week's sessions with all invited speakers

Program:
TBA



INTERNATIONAL SOCIETY FOR MR
ISMRT
RADIOGRAPHERS & TECHNOLOGISTS

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PROFESSIONALS

**ISMRT
VIRTUAL MEETINGS**

MR Safety Week 2026

27-31 JULY 2026

**Earn
CEUs!**

MR safety is an important part of our lives, and education is the cornerstone of a safe MR workplace. This year, ISMRT offers a week-long virtual event that will review safety education and highlight current issues in the MR workplace.

MONDAY, 27 JULY 20:00 UTC	• Introduction of and MR Safety Insights from the FDA MAUDE Database • Can We Trust AI?
TUESDAY, 28 JULY 20:00 UTC	• Managing Patients with Unlabeled Passive Implants on MR Systems Operating Below 1.5 T (+article) • How To Motivate Radiologists To Learn More About MR Safety
WEDNESDAY, 29 JULY 20:00 UTC	• Quench and Buttonology: The Poster • Remote Scanning and the New MRST
THURSDAY, 30 JULY 20:00 UTC	• Locked Out: The Hidden Hazards of MRI Doors • Experiences of Fire Incidents in MRI Departments
FRIDAY, 31 JULY 20:00 UTC	Q & A session with all ISMRT Safety Week Speakers

FREE registration!

LEARN MORE & REGISTER

<https://www.ismrm.org/mr-safety-links/>



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ISMARM & ISMRT MR Safety Resources

Home / ISMARM & ISMRT MR Safety Resources

ISMARM & ISMRT's MR Safety Resources



<https://www.ismrm.org/mr-safety-links/>

MR Safety Week

MR Safety Week 2026 is 27-31 July!

Click to learn more.

MR Safety Week Archives

Check out videos, quizzes & articles from past years:

[2025 MR Safety Week](#)
[2024 MR Safety Week](#)
[2023 MR Safety Week](#)
[2022 MR Safety Week](#)
[2021 MR Safety Week](#)
[2020 MR Safety Week](#)
[2019 MR Safety Week](#)
[2018 MR Safety Week](#)
[2017 MR Safety Week](#)
[2016 MR Safety Week](#)

MR Safety Education

- ▶ [Level 1: MRI Safety for ALL staff, with narration](#)
 - Includes downloadable participation certificate
 - [Greek translation](#) of the Basic MRI Safety Level 1 video

▶ [Level 2: MRI Safety for Technologists, Radiographers & MR Operators](#)

Members Only | See login note

Podcast: [MR Safety for Nurses and Technologists](#)

Members Only | See login note

Home Study 22.1: [RF Coils: A Practical Guide for Non-Physicists](#)

[Member MR Safety Education](#)

Members Only | See login note

[Free MR Safety Education](#)

Member login for members-only links:

Username: [Your Member ID Number]

Password: [Your Last Name]

Passwords are Case-Sensitive and contain no spaces, punctuation or diacritical marks.

MR Safety Resources

Printable signage: "Danger MRI Restricted Access Area"

- 📄 [Floor sign format \(horizontal\)](#) Posted 17 Oct 2024
- 📄 [Door sign format \(vertical\)](#) Posted 15 Aug 2024

[MR Safety Study Group Virtual Meeting: MRI Safety in Pediatric Patients with Implants](#)

📄 [ISM RM Best Practices for Safety Testing of Experimental RF Hardware](#)
 Posted 08 March 2022

📄 [FDA: Testing and Labeling Medical Devices for Safety in the Magnetic Resonance \(MR\) Environment](#)

[Incident Reporting Guidance](#)

[ISM RM MR Safety Articles & Reports](#)

[International and National Guidelines](#) *Under Construction*

📄 [Gadolinium Retention: A Research Roadmap from the 2018 NIH/ACR/RSNA Workshop on Gadolinium Chelates](#)

News & Events

Recently Added Resources

[MR Radiographer/Technologist Practice Issues Surrounding MR Safety](#) (2024)

📄 [ISM RM Best Practices for Safety Testing of Experimental RF Hardware](#) (2022)

📄 [FDA: Testing and Labeling Medical Devices for Safety in the Magnetic Resonance \(MR\) Environment](#) (2021)

Email MR News suggestions to info@ismrm.org



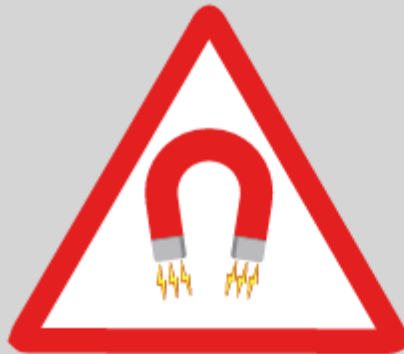


DANGER



MRI - RESTRICTED ACCESS AREA

DO NOT ENTER WITHOUT PERMISSION FROM MRI STAFF!



**STRONG
MAGNETIC FIELD
ALWAYS ON!**



STOP



**PROJECTILE RISK!
NO UNAPPROVED
OBJECTS**

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<https://www.ismrm.org/mr-safety-links/>



<https://www.ismrm.org/mr-safety-links/>





SMRT
SOCIETY FOR MR
RADIOGRAPHERS & TECHNOLOGISTS
A Section of the ISMRM

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MRI Safety

Level 1: Basic Training for All Staff in the MRI Environment

ISMRRM
SMRT Safety Committee 2017-2018

SMRT A WORLD
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FOR MAGNETIC RESONANCE
PROFESSIONALS

Certificate of Participation

**The Society for
MR Radiographers & Technologists**

certifies that

NAME: _____

has completed

**MRI Safety Level 1:
Basic Training for All Staff in the MRI Environment**

Presented by SMRT Safety Committee, and completed on

DATE: _____



Melissa Simcox, Director of Education

International Society for Magnetic Resonance in Medicine
2300 Clayton Road, Suite 620, Concord, CA 94520, USA
Telephone: +1 (925) 825-SMRT (7678) | Fax: +1 (510) 841-2340
E-mail: info@ismrm.org Website: <https://www.ismrm.org>

SMRT: Basic MRI Safety Level 1 for ALL staff, with narration

MR Safety Resources



Posters, Labels & Signage

Patient Safety in MRI: Getting Changed for your Scan



Size:
21"x30"

Understanding MRI Safety Labeling



Sizes:
8.5"x11"
11"x14"
20"x30"

Also available in [Portuguese](#)

Tips for Scanning Patients with Implants



Size:
8.5"x11"

Also available in [Portuguese](#)

ISMRT MR Safety Poster #1



Size:
18"x24"

FDA/ISMRT MRI Burn Prevention



Available in a variety of sizes & languages

Active Implanted Biomedical Devices



Size:
8.5"x11"

MR Safety Resources



Patient Safety in MRI Getting Changed for Your Scan



I'm here for my scan. Why do I need to get changed?

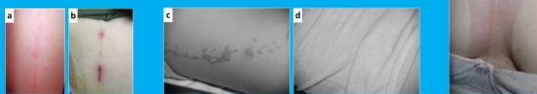
The MRI machine has a large magnet inside, and any metallic items may interact with it and become a hazard¹. This includes loose metal items such as keys and other items often carried in pockets. Clothing with zips and studs or underwear with hooks can also heat up in the MRI scanner and cause burns to your skin.

But I don't have any zips or metal anywhere on my clothes...

There are also some types of clothing fabrics that have anti-microbial or antiperspirant properties to reduce body odour. These can be made from microfibres that can heat up, such as silver, resulting in burns to patients.

What kind of burns?

Several patients have had second-degree burns while wearing clothing containing these fibres. One patient even had third-degree burns to her forearm when the fabric of the blouse she was wearing caught fire².



(a) Second-degree burn on leg
(b) One week later
(c) Second-degree burn on flank
(d) T-shirt containing silver microfibres²

I don't think my clothes are made out of those kinds of fibres...

Metallic microfibres are incorporated into fabrics in many new lines of clothing and athletic wear now being sold. This may not be mentioned on the labelling. Microfibres are not visible to the naked eye, so this clothing can look identical to clothing without these fibres.

But I really don't want to get changed...

Our facility is concerned about these risks and has implemented this policy to keep all our patients safe by asking them to change out of street clothes and into an MRI-safe gown.

So the policy is that I must wear a gown for my MRI scan?

Yes. We follow all procedures that minimise any risks, no matter how small, to our patients. Your safety while having your scan is very important to us. Thank you for your cooperation!

Understanding MRI Safety Labeling

The MR environment has unique safety hazards for patients with implants, external devices and accessory medical devices. Implants, medical devices and other equipment used in or near the MR environment should be labeled as

MR Unsafe, MR Conditional or MR Safe.



MR Unsafe items should not enter the MRI scanner room. Patients with MR Unsafe devices should not be scanned.

MR Conditional items may safely enter the MRI scanner room only under the very specific conditions provided in the labeling. Patients should not be scanned unless the device can be positively identified as MR Conditional AND the conditions for safe use are met.

The conditions for safe use will be different based on the intended use of the device.

For items intended to enter the bore of the MRI system, the MRI Safety labeling should be matched with the MRI system for:

- Static field strength
- Maximum spatial field gradient
- dB/dt limitations (usually only applicable to active implants)
- SAR limits
- Any other conditions needed for safe use of the device; for example, restrictions on the types of coils that may be used

When present, information about expected temperature rise and artifact extent may inform the risk/benefit decision of whether or not a patient should undergo an MRI examination. Expected temperature rise and artifact extent information are not conditions that must be met.

Items NOT intended to enter the bore of the MRI system usually have Gauss line positioning restrictions or requirements to tether or affix the device to an unmovable part of the room.

MR Safe items pose no safety hazards in the MR environment. They may be placed anywhere in the MR environment. Patients with MR Safe devices have no scanning restrictions.



Magnetic Resonance Imaging Tips for Scanning Patients with Implants



- Follow your site's process for screening the patient.
- Identify the manufacturer and model of any implanted devices.
- Locate the MRI safety information in the device manufacturer's labeling.

Look for one of these icons:



MR Safe: Patients with MR Safe devices have no scanning restrictions.



MR Conditional: For patients with MR Conditional devices, implant conditions should be matched with the MR system information.

- Consult your MR system manual for MR system information.
- Ensure that the MR system meets all conditions provided in the MR Conditional labeling.
- If conditions are not met, the patient should not be scanned.



MR Unsafe: Patients with MR Unsafe devices should not be scanned. Assume any unidentified implant is MR Unsafe.



- Document device information in the medical record.
- Consult a physician for any risk/benefit decisions for MR Conditional devices.
- Follow all pre-scan conditions such as special programming modes.

BEFORE

- For MR Conditional devices, follow all scan conditions such as specific absorption rate (SAR) restrictions or patient positioning instructions.
- Monitor the patient at all times.

DURING

- Assess the patient for discomfort or injuries.
- Follow any post-scan conditions such as device checks or programming.



<https://www.ismrm.org/mr-safety-links/>

MR Safety Resources

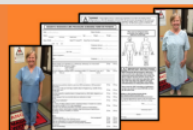
ISMRT | INTERNATIONAL SOCIETY FOR MR RADIOGRAPHERS & TECHNOLOGISTS
A SECTION OF THE INTERNATIONAL SOCIETY FOR MAGNETIC RESONANCE IN MEDICINE (ISMRM)



Keeping Safe in MRI

Screening for MRI

Comprehensive Screening Form
Thorough Patient Interview & Evaluation
No Street Clothes or Shoes on Patients



Magnetic Field (B_0)

Make No Assumptions → Ask Questions
Assess Metal → No Projectiles & No Torque
"MR Safe" or "MR Conditional" → Identify & Comply



Acoustic Protection & Monitoring

Hearing Protection → Always
Squeeze Bulb Provided → Always
Constant Visual & Audio Monitoring → Always



RF Field (B_1)

No Loops in Cables or Anatomy
Assess Metal → No Heating & No Burns
Separate & Insulate Anatomy, Bore Walls & Cables



Trained & Educated

MRI Safety Training for MRI Staff & MDs
Annual Training for Nursing & Ancillary Staff
Policies Set by Departmental MRI Safety Committee



www.ismrm.org/mr-safety-links

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Visit the ISMRT MR Safety Website
for real-time resources & information!
www.ismrm.org/mr-safety-links

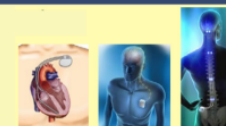


ISMRT MRI Safety Active Implanted Biomedical Devices

Does your patient have an implanted device that is electronic,
programmable, or provides active therapy?

Need to obtain the following information:

- Manufacturer name
- Model name and/or number
- Serial number



Does the active implanted device have MRI safety information?

- "MR Conditional"
- "MR Unsafe"
- Not tested or labeled for MRI
- FDA warning



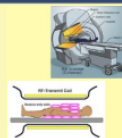
Risk-versus-benefit decision is conducted by the MR physician

- Does the device require special programming or monitoring?
- Any scanning limitations?
- Are there exclusion zones?
- Do you have the personnel and necessary equipment to meet the "MR Conditional" labeling requirements of the device?



Device labeling "MR conditions" necessary to fulfill can include:

- Field strength (B_0)
- Maximum spatial gradient level (B_1)
- RF coil (transmit-receive coil or whole-body transmit coil)
- SAR and/or B1+rms levels
- Time-varying gradient magnetic fields (dB/dt or slew rate)
- Length of each MRI acquisition/scan



Is your MRI suite equipped and ready to handle adverse events?

- Overriding safety warnings can result in injuries and potentially life-threatening events.



MR Safety Resources



Prevenzione delle ustioni in risonanza magnetica

Misure di sicurezza per il paziente

Valutare se il paziente e' portatore di impianti, dispositivi medici e/o altri oggetti metallici. Si consideri *MR unsafe* (cioe' non sicuro) qualsiasi oggetto il cui comportamento in risonanza magnetica non sia noto.






Controllare tutti gli oggetti e assicurarsi che tutto cio' che entra nella stanza dove si esegue la risonanza magnetica sia *MR conditional* o *MR safe*. Qualora il dispositivo sia *MR conditional*, assicurarsi che le condizioni di scansione specificate nell'etichetta del dispositivo siano rispettate. Tutti i metalli, anche quelli non ferromagnetici, possono surriscaldarsi e causare ustioni.

Quando possibile, chiedere al paziente di cambiarsi e usare l'apposita uniforme.



Posizionare il paziente in modo tale da evitare contatto pelle con pelle (per esempio evitare il contatto delle mani con i fianchi, evitare braccia e/o gambe incrociate, ecc.).

Usare sempre l'imbottitura fornita dalla casa produttrice dello scanner per isolare il paziente. Lenzuola e coperte possono essere usate per migliorare il comfort del paziente ma non sostituiscono l'imbottitura fornita dalla casa produttrice.



Allontanare eventuali cavi dallo scanner. Evitare di avvolgere i cavi a formare anelli ed evitare accuratamente il contatto dei cavi con il paziente.

Usare solamente il protocollo di modalita' operativa normale e un SAR quanto piu' basso possibile.





Non distrarsi e controllare il paziente durante tutta la scansione. Parlare con il paziente cosi da identificare tempestivamente un eventuale surriscaldamento. Monitorare i pazienti sedati con apparecchiatura che sia anch'essa *MR conditional*.





Esonero di responsabilita'. La traduzione di questo documento in italiano non e' stata effettuata dalla Food and Drug Administration.

<https://www.asrt.org/events-and-conferences/mr-safety-week>



July 26-Aug. 1, 2026

<https://www.asrt.org/events-and-conferences/mr-safety-week>

MR Safety Week
asrt

July 26-Aug. 1, 2026

Managing Claustrophobia & Patient Anxiety
Support safer, more successful MR examinations

What To Do:

- Engage the Exam Room: Encourage communication between staff and patient.
- Encourage Relaxation: Slow breathing and visualization can ease anxiety.
- Offer Comfort: Music, eye masks, blankets and heating pads can reduce discomfort.
- Maintain Communication: Provide updates and allow patients to ask questions at any time.
- Plan Ahead: Sedation or anesthesia services may be required for high anxiety.

Why It Matters:

- Up to 30% of patients experience anxiety & a long AMR examination!
- Claustrophobia can cause scan termination in up to 10% of patients!
- Studies show that most tell anxiety interventions have a positive effect on reducing time the patient or technician spends in the scanner.

MR Safety Week
asrt

[asrt.org/MRSafetyWeek](https://www.asrt.org/MRSafetyWeek)

Keep MR Safety a Priority

MR technologists are on the front lines of patient safety and MRI-related injury prevention. Participate in MR Safety Week with a new safety poster for your workplace, take advantage of MR safety-related educational opportunities and share your dedication to patient safety with sharable social media graphics.



Device Screening **MR Safety Week** asrt

Screening Protocol
Opportunities for patient to identify device:

- Questionnaire
- Technologist review
- Verbal verification

Device Identification

- Manufacturer, model and serial number
- MR labeling
- Document in medical record

During Exam

- Closely monitor patient
- Examine localizer images

Post Exam

- Evaluate patient
- Device prepared or reprogrammed, if required

GO
✓ MR Safe Label

CAUTION
! MR Conditional Label
! No Label for MR
! Proceed only after all the following are met:

- MR system meets device conditions
- Device prepared or programmed, if required
- Risk-benefit assessment by a radiologist

STOP

- ✗ MR Unsafe Label
- ✗ MR System Conditions Not Met
- ✗ Device Conditions Not Met
- ✗ Unidentified Device

asrt.org/MRSafetyWeek



MR Safety Week asrt

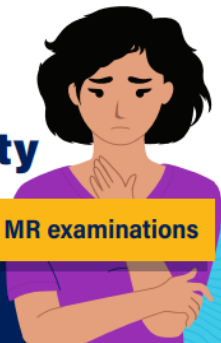
Facebook, Instagram, X, LinkedIn

asrt American Society of Radiologic Technologists



Resources for MR Safety Week

Managing Claustrophobia & Patient Anxiety



Support safer, more successful MR examinations

What To Do:

- Explain the Examination:** Clear, calm communication reduces fear and builds trust.
- Encourage Relaxation:** Slow breathing and mindfulness can ease anxiety.
- Offer Comfort:** Music, eye masks, blankets and hearing protection can reduce outside stimuli.
- Maintain Communication:** Provide updates and ensure patients can alert staff at any time.
- Plan Ahead:** Sedation or alternative scanners may be appropriate for high anxiety.

Why It Matters:

Up to 37% of patients experience anxiety during MR examinations.¹



Claustrophobia can cause scan termination in up to 15% of patients.²



Studies show that most MR anxiety interventions have a positive effect on reducing anxiety, sedation or incomplete examinations.³



asrt.org/MRSafetyWeek

To view data references, visit asrt.org/Managing-Anxiety-References.

Hearing Protection



Safety Measures for Radiologic Technologists in the MR Environment

- Wear Hearing Protection:** All individuals in Zone 4 during active scanning must wear one or more forms of hearing protection.
- Choose the Right Gear:** Use MR-safe hearing protection for comfort and to reduce noise below 99 dB(A).
- Ensure Proper Fit:** Follow the manufacturer's instructions for wearing hearing protection devices.
- Inform Patients:** Explain MR noise levels and the importance of hearing protection.
- Know the Risks:** Train staff on safe practices in high-noise environments and the importance of hearing protection.

Key Facts

- MR Equipment Noise Levels:** Can reach 130 dB — as loud as a jet engine.¹
- Safe Listening Levels:** ≤80 dB for adults, ≤75 dB for children.²
- Protected Hearing:** Effective hearing protection can reduce active scanning noise by up to 28-30 dB(A).¹
- Unprotected Hearing:** Hearing damage can start at 85 dB. Noise levels >120 dB can cause immediate hearing loss.³



asrt.org/MRSafetyWeek

To view data references, visit asrt.org/hearing-protection-references.



Resources for MR Safety Week

Burn Prevention

MR Safety Week
asrt

- No contact with bore
- Screening for devices, implants, onplants, metallic objects and materials, and removal if appropriate
- Cables insulated and not in contact with patient
- Padding placed appropriately
- Patient wearing hospital gown
- No skin-to-skin contact

59% Burns account for 59% of all MRI-related injuries.¹

55% 55% of burn incidents are caused by contact with objects, bore and skin-to-skin.¹

100% These measures can prevent 100% of burn injuries in clinical care scenarios.

1. Gellera JG, Arnsperg CM, Fletcher SA, Miller DL. MRI-related T2A adverse event reports: a 10-yr review. Medical Physics. 2019;46(10):5542-5571. doi:10.1002/mp.13168

4 Projectile Prevention Strategies

- 4-Zone MRI Site**
Restrict unauthorized entry to magnet through controlled access between zones.
- Pre-Visit Screening**
Thorough questionnaire, technologist review and verification prior to exam.
- On-site Ferromagnetic Detection**
Check for ferrous objects and devices prior to exam.
- Labeling**

 - MR Safe:** may enter MR environment without restrictions and may be scanned
 - MR Conditional:** further evaluation and identification required to enter MR environment or be scanned
 - MR Unsafe:** may never enter MR environment or be scanned

MR Safety Week
asrt

69% 69% of injury accidents due to projectiles are preventable.

100% 100% of injury accidents due to projectiles in a clinical care setting are preventable.

WHITE PAPER

Radiologic Technologist Best Practices for MR Safety

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https://www.asrt.org/docs/default-source/research/whitepapers/asrt18_mrsafetywhitepaper.pdf?sfvrsn=ca0222d0_10



ASRT Magnetic Resonance Safety Resources



MR Safety Week

27-31 July 2026 | #MRSafety

https://bir.org.uk/get-involved/special-interest-groups/bir-magnetic-resonance/mr-safety.aspx?utm_campaign=4876047_July%202026%20newsletter%20non-members&utm_medium=email&utm_source=The%20British%20Institute%20of%20Radiology&dm_i=7YPR,2WIDR,5B92RM,79B4F,1,0,0,0



Update to the MR safety labelling standard

ASTM F2503¹ is the international standard for the labelling of medical devices and other items for safety in the MR Environment. It defines the terms MR Safe, MR Conditional and MR Unsafe. An updated version of this standard, ASTM F2503-26, was published earlier this year. This includes some small changes to improve the wording of the definitions, although the intentions behind each of these remain unchanged. This update provides an opportunity to reflect on the terms and to highlight some background aspects to help understand their definitions in the broader context of medical device risk management. The updated definitions are as follows.



MR Conditional—having demonstrated safety in the MR Environment within defined conditions.



MR Safe—posing no known hazards resulting from exposure to any MR Environment.



MR Unsafe—posing unacceptable risk within the MR Environment.

The MR Environment is the volume around the MR scanner where a hazard may arise from an item being exposed to the electromagnetic fields generated by the MR equipment. Hence, the MR Environment is a combination of the B0 Hazard Area (defined by the 0.9 mT fringe field, also known as the 9 gauss line) and the Faraday shielded volume (defined by the Faraday cage, also known as the RF cabin or RF cage).

An important backdrop to these MR safety labelling definitions is ISO 14971, the international standard for the application of risk management to medical devices. This defines safety as “freedom from unacceptable risk” which feeds into the definition of MR Unsafe. The general process of ISO 14971 is that risks are unacceptable until they are assessed, potentially mitigated and determined to meet acceptability criteria. Medical device manufacturers reduce risks in the design process to specified levels, after which they become known as residual risks. Subsequently, through MR safety testing, manufacturers gather evidence to demonstrate acceptable residual risks within certain conditions to regulatory bodies, i.e. to demonstrate safety. This feeds into the definition of MR Conditional.

A key aspect of MR Conditional is that the statement of demonstrated safety only applies when all of the stated MR conditions are met. Consequently, identifying an item is labelled as MR Conditional is only the initial step. The second step is to establish what all the conditions are. The third step is to establish whether all the conditions can be met. Typically, these conditions include limitations on the static magnetic field, the time-varying gradient magnetic fields and the RF fields, but various other limitations or requirements may also be specified.

MR Safe labelling is only valid for those items that are composed entirely of electrically nonconductive, nonmetallic, and nonmagnetic materials, since these materials do not present any hazard when exposed to the electromagnetic fields generated by any MR equipment. MR Safe items may still potentially cause MR image artifacts, e.g. an alcohol wipe.

Finally, an important aspect of ISO 14971 is that its scope is limited to device manufacturers performing a population-based risk assessment. It explicitly excludes decisions about the use of an individual medical device in the context of a specific clinical procedure, highlighting that some of these decisions can be made only by a qualified medical practitioner with knowledge of the patient's health status, balancing the residual risks against the anticipated benefits of the procedure. Guidelines from the MHRA² and ACR³ provide recommendations on how to develop a local procedure where such a clinical risk-benefit decision is required.

[1] <https://store.astm.org/f2503-26.html>, [2] <https://www.gov.uk/government/publications/safety-guidelines-for-magnetic-resonance-imaging-equipment-in-clinical-use> [3] <https://www.acr.org/Clinical-Resources/Clinical-Tools-and-Reference/radiology-safety/mr-safety>

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MR Safety Advice 2025



Magnetic Resonance Output Conditioning (MROC)

The latest version of the IEC standard, published in the UK as (BS EN IEC-60601-2-33:2024 Edition 4.0) *Particular requirement for the basic safety and essential performance of magnetic resonance equipment for medical diagnosis* introduced the mandatory functionality of MR Equipment Output Conditioning (MROC). MROC only applies to proton imaging (^1H) at 1.5 T and 3 T, but other field strength systems may implement MROC. Manufacturers typically have a regulatory grace period of three years from publication to fully implement these changes, although some manufacturers have already implemented similar capabilities to MROC.

The intended purpose of MROC is to enable the automatic control of MR scanner outputs, given the relevant MR Conditional label values and thus optimise potential workflow-induced errors. Hazards or hazardous situations associated with scanning patients with medical devices declared as MR Conditional, and to support the operator to perform the examination in accordance with the requirements specified on the medical device label.

Note that MROC is not an additional operating mode like normal and first level, but allows the specification of additional output limits. MROC should also include a means to remind the operator to consider other conditions relevant to safety, e.g., landmark restrictions, scan time limitations, etc.

MROC works alongside existing controls, i.e., SAR, and allows the operator to -

- Select the RF transmit (Tx) coil type and RF polarisation, e.g., circularly polarised or multi-channel (CP, MC-2 or MC-N). If an MR Conditional device does not specify RF polarisation type, then CP should be assumed.
- Select the maximum B1+RMS (this is the maximal value when averaged over any 10s period of the sequence) in μT .
- Select the maximum gradient slew rate $|dB/dt|_{\text{PEAK}}$ per gradient axis in T/m/s .

MROC automatically ensures that the maximum B1+PEAK shall not exceed the following values:

RF Transmit Coil	1.5 T	3 T
Whole-body RF Tx coil	$\leq 30 \mu\text{T}$	$\leq 24 \mu\text{T}$
Other volume RF Tx coils, e.g. Head, Knee, Hand	$\leq 45 \mu\text{T}$	$\leq 35 \mu\text{T}$

When MROC is selected the user interface must continuously display the abbreviation "MROC" and display, upon request or continuously, the parameters described above together with any other additional parameters or selectable options that have been implemented.

Note that the MROC parameters displayed are conservative (to protect patient safety) and can therefore represent an overestimate of actual outputs.

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MR Safety Advice 2025



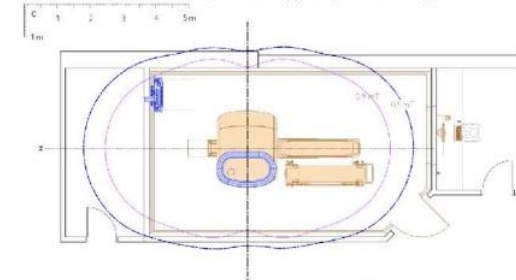
0.9 mT is the new 0.5 mT

Manufacturers of pacemakers and other active implantable medical devices have long used handheld magnets to non-invasively modify the function of the implanted device, putting them into a so-called "magnet mode".

"5 gauss", or to put it into international SI units – 0.5 mT, is a phrase that is likely to be familiar to many working in MRI. It is the static magnetic field strength threshold that historically been associated with protecting against inadvertently putting such implants into "magnet mode". However, after many years of discussion and consideration, the latest version of the MR safety standard IEC 60601-2-33 has nudged this up to 0.9 mT, putting it more into sync with the 1.0 mT threshold that the manufacturers of these active devices have long been working to. The slightly lower 0.9 mT value in IEC 60601-2-33 arises from a specified uncertainty of 0.1 mT either side of the 1.0 mT threshold. The European and UK versions of this update to IEC 60601-2-33 were published in late 2024.



Practically, the impact of this change is likely to be most significant when it comes to planning new MRI systems. As the figure below (reproduced from a review on this topic by [Stedkner et al, MRM 2024](#)) shows, working to a threshold of 0.9 mT instead of 0.5 mT can mean the difference between needing to install expensive passive shielding to keep the threshold within the MR exam room. This, together with potential structural reinforcement to accommodate the weight of the shielding, can push the costs and project time up and in some cases render a potential siting proposal as cost prohibitive. Although the 0.9 mT threshold is about one-step closer to the start of the projectile zone that is estimated to start around 3 mT, the original 0.5 mT threshold was never about projectiles. Its focus was always about avoiding inadvertently putting devices in "magnet mode".



Note, employers still have a legal obligation under UK legislation perform a risk assessment for any occupational exposure to magnetic fields above 0.5 mT. However, if as part of this risk assessment a local decision is made to recognise 0.9 mT as an appropriate threshold, then it appears they would be compliant with their legal obligations. See [Stedkner et al, MRM 2024](#) for further details on this topic.

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MR Safety Advice 2025

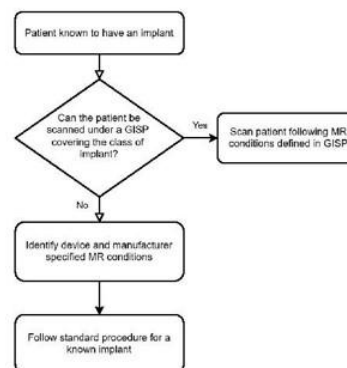


Generic Implant Safety Procedures

MHRA guidelines recommend that MRI departments should have a procedure for identification, documentation, imaging and aftercare for patients with implantable medical devices who undergo MRI. The guidance states that users should refer to the implant manufacturers for advice. Similar guidance exists in multiple other countries.

Identification of devices and their manufacturer's instructions can be difficult. There is compelling evidence that the risk posed by certain categories of device is very low. In these categories, it may be appropriate to use a standardised "generic" workflow without the need for explicit identification.

Generic implant safety procedures (GISPs) are locally developed procedures, incorporating an evidence-based risk-benefit decision to scan certain groups of patients and implants under specific conditions without exact identification of the implant or without the assurance of MR safety by the manufacturer.



Guidance on the development of GISPs [1] has recently been produced by a multi-professional group. This guidance provides a detailed framework on the development process, from evidence review and risk assessment, through to dissemination, governance procedures, and subsequent audit and updates.

Potential risks of GISPs include outdated procedures which don't incorporate new or changed devices; scanning against labelled MR conditions (off-label); and confusion about applicability. For this reason, GISPs need to be implemented within an appropriate governance framework.

The GISP process occurs before the normal procedure of rigorous device identification and determination of manufacturer provided MR conditions.

1. Ashmore et al. Br J Radiol (2025) Mar 1;98(1167):336-344 2025 <https://pubmed.ncbi.nlm.nih.gov/39535863/>

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MR Safety Advice 2025



National Incident Learning System in MRI

Learning from incidents and near miss events is an essential part of MRI safety to improve patient safeguarding. To support this, the Medical Exposures Group (MEG) in UKHSA are leading the implementation of a national incident learning system which includes MRI, clinical imaging and nuclear medicine.

The learning system is now accepting incident and near miss data from clinical providers.

Establish an implementation team



Identify data submission route



Apply coding taxonomy



Data submission



Local & national trend analysis



How can my department participate?

To participate, clinical providers can submit anonymised coded incident and near miss event to UKHSA.

- The nationally agreed [coding taxonomy](#) must be applied to the incident prior to data submission.
- [User guidance](#) is available to support providers with the application of the coding taxonomy, which includes coded MRI scenarios.

Establishing a local implementation team will support staff with reviewing MRI events and applying the appropriate coding. It may be beneficial to include a variety of stakeholders in this group, such as senior MRI radiographers, quality assurance leads and the MRSE to ensure a consistent approach.

Once you have coded the incident, the completed coding should appear similar to this: **PRIA24/L3/E1/MG/P7/1.1c/1.3a/CF1a**.

This completed coded sequence can then be added to the **incident description** section on the local incident reporting system after the investigation has been completed.

How can my department submit data?

- For England based clinical providers connected to the Learning From Patient Safety Events (LFPE), data will be extracted from the system and shared with UKHSA for analysis. To ensure your data is included in the national analysis providers should include the trigger code **PRIA24** in the **incident description** section of their local report.
- For Welsh providers connected to the Once for Wales Concerns Management System (OFW), the coding is built into the system and your data will be extracted automatically and sent to UKHSA.

For departments in Northern Ireland, Scotland and the independent sector, clinical providers can submit data directly to MEG.learningssystem@ukhsa.gov.uk.

To support shared learning across the MRI community, MEG will publish regular reports on this analysis on the gov.uk website. These reports will explore MRI specific themes and trends.

For further information please visit the MEG webpages: <https://www.ukhsa-protectionservices.org.uk/meg/incidentlearning/>

Or contact the MEG team via email: MEG.learningssystem@ukhsa.gov.uk



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MR Safety Advice 2025



Update on Fire Risk assessment

An MRI unit contains hazards which impact on the way in which a fire can be managed. In particular, the scanner's static magnetic field can pose a significant projectile hazard, which may impact on firefighting.

The MHRA guidelines recommend that adequate written procedures are issued, including those related to environmental emergencies such as fire. A site-specific risk assessment would typically inform such procedures. An example risk assessment template is provided by BIR.

Earlier this year, an update to this fire risk assessment template was published. This involved two main changes.

Removal of recommendation of firestopping of cable penetrations between the examination room and the technical room

These cables form part of the medical device and its certification. Addition of extra firestopping materials in effect represents a modification of the device outside of its certification. Due to the complexity of the interconnections between the examination room, technical room and control room, these should be within the same fire protection zone, and firestopping would be unnecessary between these rooms.



Example layout illustrating location of fire barriers enclosing the combination of MR examination room, technical room and control room.

Clarification of fire resistance of electrical connection of the emergency quench system

In 2011, a fire incident occurred resulting in damage to the electrical connections between the quench button and the magnet, resulting in failure of the quench button. The risk assessment referred to fire ratings in the BS7671 wiring regulations. However, as the quench control cables form part of the medical device, compliance with BS7671 is not applicable. The risk assessment has been modified to describe alternative fire protection methods, such as installation of the cables in a fire-retardant enclosed raceway.

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THE BEST OF METRASENS MRI SAFETY RESOURCES TOP TEN CHART

MRI SAFETY WEEK 2026

<https://www.metrasens.com/resource/the-best-of-mri-safety-2026/>



MRI SAFETY WEEK 2025

<https://www.metrasens.com/event/2025-mri-safety-week/>



MONDAY, JULY 21

MRI SAFETY CROSSWORD

Our MRI Safety crossword will be sure to delight. Test your knowledge and compete as a team to see who reigns supreme across your department. Want to make it more interesting - time yourself and see who can complete the crossword the fastest!

[Register Now](#)



TUESDAY, JULY 22

(WEBINAR - PART#1) BUILDING A STRONG MR SAFETY PROGRAM: FROM POLICY TO PRACTICE

Join Metrasens' Manager of MRI Safety Training & Education, Kellye Mantooth, as she presents part 1 of a 2-part webinar series on how to engage leadership in establishing a comprehensive MRI Safety program.





WEDNESDAY, JULY 23

(PODCAST) DISTANCE WITH DILIGENCE: REMOTE MRI IN PRACTICE

Host of the Metrasens Podcast, MRI Safety Talks, Kellye Mantooth will be joined by Kristan Harrington for a candid conversation about one of the hottest—and most complex—topics in imaging today: remote MRI scanning.



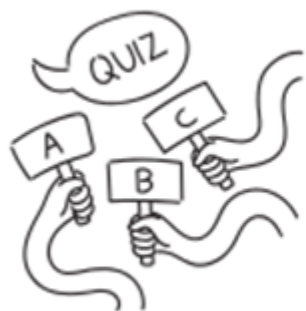
THURSDAY, JULY 24

(WEBINAR - PART#2) BUILDING A STRONG MR SAFETY PROGRAM: FROM POLICY TO PRACTICE

Kellye Mantooth will pick up where she left off on Tuesday with the part-2 continuation of this webinar on building a comprehensive MRI Safety program.



Register Now



FRIDAY, JULY 25

TEST YOUR KNOWLEDGE QUIZ

Make teams and compete in this MRI Safety game of skill. Will you be crowned champion of your team or take the walk of shame back to your department?



MRI Safety Week 2025
Protecting Patients. Empowering Professionals.

Get engaged with a week of wonderful content, fun activities, and profound insights you can take into your day-to-day.

Yes Please!



Register Now



MRI Safety Week

Each year in the last week of July MRI safety is highlighted by the MR community. The date reflects the anniversary of the death of a young patient due to an MR unsafe oxygen cylinder being taken into the MR environment.

Each year members and the SoR MR Advisory Group produce materials for MRI services.

- [Documents available for download](#)
- [Posters available for download](#)
 - [Have you pause and checked? MR](#)

<https://www.sor.org/news/mri/mri-safety-week-poster-competition-%E2%80%93-call-for-subm>

News | MRI | **MRI Safety Week poster competition – Call for submissions**

MRI Safety Week poster competition – Call for submissions

The SoR Magnetic Resonance Advisory Group is seeking input from members to help highlight best practice

Published: 28 May 2026

MRI





Produced for MRI Safety Week
Promoting practices that keep patients and staff safe.
MRI Safety Poster Competition: organised by the SoR
Magnetic Resonance Advisory Group.

Winner
Lisa Cox
Senior Research & MRI Radiographer
Newcastle-upon-Tyne NHS Trust

MRI SAFETY WEEK

DANGER BEWARE!
REMEMBER TO DECLARE...



Cardiac devices including pacemakers & ICD's

Brain & eye surgeries, clips, coils, stimulators



Orthopaedic implants, stents, artificial limbs,
any penetrating metal injuries & shrapnel

Medicinal & hormone patches, diabetic
monitoring devices, silver backed dressings



THE MAGNET IS ALWAYS ON!

Produced for MRI Safety Week
Promoting practices that keep patients and staff safe.
MRI Safety Poster Competition: organised by the SoR
Magnetic Resonance Advisory Group.

Runner up
Katie Bagshawe
MRI Radiographer
Sheffield Teaching Hospitals NHS Foundation Trust

WHY DO I NEED HEARING PROTECTION?

MRI SOUND LEVELS CAN REACH UP TO 130 DECIBELS, MAKING IT LOUDER THAN.....



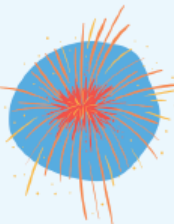
Alarm clock
70 decibels



Construction jackhammer
130 decibels



Food processor
94 decibels



Fireworks
120 decibels



Rock concert
112 decibels



Fire Alarm
97 decibels



Jet plane take off
120 decibels



The noise in an MRI scanner is produced by parts of the equipment (gradient coils) which have rapidly changing currents and this produces vibrations/the noise!

Produced for MRI Safety Week

Promoting practices that keep patients and staff safe. MRI Safety Poster Competition: organised by the SoR Magnetic Resonance Advisory Group.

Runner up

Alice Milligan

Deputy Clinical Lead Radiographer MRI, Somerset Foundation Trust

PADDING SAFETY

FOAM PADS

Foam pads come in a variety of shapes and sizes, and are often used in MRI to maximise patient comfort, reduce movement and thus improve image quality.

They are also essential to use for patient **safety** and should be 1-2cm thick to ensure injuries are avoided.

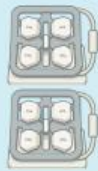


SKIN TO SKIN



RF energy can create electric currents in the body. If there is skin to skin contact this forms a loop which the electric currents can flow through. By using foam pads these loops can be broken.

COILS



RF coils can generate heat which can cause injuries if in direct contact with skin. By using the insulated foam pads provided by manufacturers, heating and burns to the patient can be avoided.

PREVENTS BURNS

Reducing patient heating in the MRI scanner is one of the most important safety precautions to take. Appropriate insulated padding is an effective way to prevent heating and burn related injuries to the patient.



PADDING POSITIVES

- Patient safety
- Patient comfort and support
- Reduce movement



RESULT

Optimal patient safety and experience achieved, whilst producing best possible image quality.

Produced for MRI Safety Week

Promoting practices that keep patients and staff safe.
MRI Safety Poster Competition: organised by the SoR
Magnetic Resonance Advisory Group.

Runner up

Tiffany Robcraft
MRI Radiographer
University Hospitals Sussex

Professional support | Professional practice | Diagnostic Imaging | Magnetic Resonance Imaging (MRI) | **MRI safety**

MRI safety

This page provides advice on practicing MRI safely, including the procedure, equipment and patient safety



<https://www.sor.org/learning-advice/professional-practice/diagnostic-imaging-pathways/mri/mri-safety#MRI-Safety-Week>



MRI Safety Flyer

Date published: 13 August, 2024

Topics: Imaging, MRI, Diagnostic

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MR Safety Awareness

Date published: 26 July, 2023

Topics: Imaging, MRI, Diagnostic

[Download PDF](#)



Referring a patient for an MRI scan?

Date published: 24 July, 2024

Topics: Imaging, MRI, Diagnostic

[Download PDF](#)



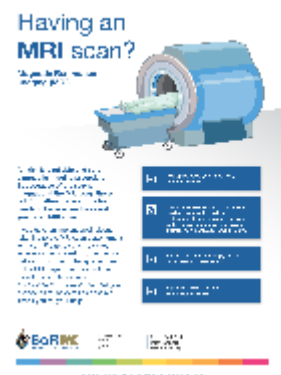
Having an MRI scan?

Date published: 24 July, 2024

Topics: Imaging, MRI, Diagnostic

[Download PDF](#)







MRI SAFETY:

what we need to know about

moving an MRI

For more information on moving an MRI, visit www.mrisafety.com

- **Authorized user**
- **High contrast**
Use of high contrast in the field of view
- **Acoustic shielding**
Acoustic shielding in the field of view
- **Acoustic shielding**
Acoustic shielding in the field of view
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For more information on MRI safety, visit www.mrisafety.com

- **Acoustic shielding**
Acoustic shielding in the field of view
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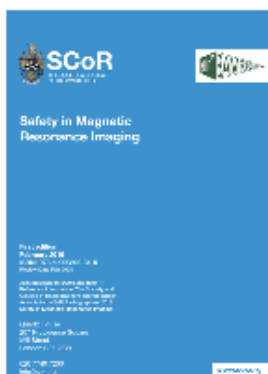

Have you 'paused and checked'?

Provisional Checklist for MRI Paediatrics

P	History	1. Has the patient been referred to MRI for a specific clinical indication? 2. Have you reviewed the patient's history and clinical records? 3. Have you reviewed the patient's previous imaging studies? 4. Have you reviewed the patient's previous MRI studies? 5. Have you reviewed the patient's previous MRI studies?
A	Assessment	1. Have you reviewed the patient's clinical records? 2. Have you reviewed the patient's previous imaging studies? 3. Have you reviewed the patient's previous MRI studies? 4. Have you reviewed the patient's previous MRI studies? 5. Have you reviewed the patient's previous MRI studies?
J	Justification	1. Have you reviewed the patient's clinical records? 2. Have you reviewed the patient's previous imaging studies? 3. Have you reviewed the patient's previous MRI studies? 4. Have you reviewed the patient's previous MRI studies? 5. Have you reviewed the patient's previous MRI studies?
S	Stabilisation & Settings	1. Have you reviewed the patient's clinical records? 2. Have you reviewed the patient's previous imaging studies? 3. Have you reviewed the patient's previous MRI studies? 4. Have you reviewed the patient's previous MRI studies? 5. Have you reviewed the patient's previous MRI studies?
B	Baseline	1. Have you reviewed the patient's clinical records? 2. Have you reviewed the patient's previous imaging studies? 3. Have you reviewed the patient's previous MRI studies? 4. Have you reviewed the patient's previous MRI studies? 5. Have you reviewed the patient's previous MRI studies?
D	Data	1. Have you reviewed the patient's clinical records? 2. Have you reviewed the patient's previous imaging studies? 3. Have you reviewed the patient's previous MRI studies? 4. Have you reviewed the patient's previous MRI studies? 5. Have you reviewed the patient's previous MRI studies?

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<https://www.sor.org/learning-advice/professional-body-guidance-and-publications/documents-and-publications/policy-guidance-document-library/safety-in-magnetic-resonance-imaging>



Safety in Magnetic Resonance Imaging

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Introduction To MRI Safety 5th Edition



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Most MRI incidents can be avoided. Regular MRI safety training is one of our greatest weapons in preventing accidents. Many MRI safety incidents happen when non-MRI personnel are trying to help with patient care. Others happen during medical emergencies (codes) when personnel are focused on resuscitating a patient and forget about the invisible danger of the magnetic field. Unfortunately, even with an increased focus on safety, accidents in MRI departments still happen. A recent study found that 74% of MRI incidents could have been prevented by following standard safety practices.

British Association of MRI Radiographers



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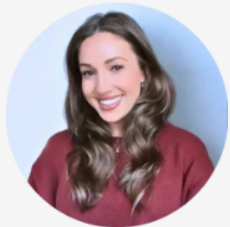
MRI SAFETY WEBINAR SERIES

Nordinsight and Pearl Technology present a webinar series focused on MRI Safety, bringing together leading experts to share practical insights, current knowledge, and relevant topics for everyday MRI practice.

EXPANDING THE RESPONSIBILITIES OF THE MR TECHNOLOGIST

WEBINAR 1: MRI SAFETY THEN & NOW

DATE: 15 JULY 2026 TIME: 10:00 CT (15:00 UTC)



FEATURED SPEAKER: KELLYE CHIA, RT(R)(MR), MRSO(MRSC™), MRSE(MRSC™)

Kellye Chia is Director of Clinical Success and MRI Safety at NordInsight, as well as an MRI safety consultant, educator, and expert witness. She has extensive experience in clinical MRI practice, safety leadership, and industry innovation.

Kellye is board credentialed as both MR Safety Officer (MRSO) and MR Safety Expert (MRSE) and serves in several international leadership roles, including with the ISMRT and IBMRS, to advance MRI safety and education.

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BRIDGING THE GAP BETWEEN THE REMOTE MR TECHNOLOGIST AND THE PATIENT

WEBINAR 2: THE MR SAFETY TECH (MRST)

DATE: 28 JULY 2026 TIME: 10:00 CT (15:00 UTC)



FEATURED SPEAKER: KRISTAN HARRINGTON, MBA, RT(R)(MR), MRSO(MRSC™)

Kristan Harrington has dedicated her career to MRI since 1994, with experience spanning clinical practice, education, industry, and MRI safety consulting. She began as an MRI Technologist at Emory University, later leading the MRI Bachelor's Program at Emory University School of Medicine and serving as adjunct faculty at Rush University.

Kristan is the owner of T2 Star Radiology Solutions, LLC, where she focuses on MRI safety and risk mitigation strategies for clinical facilities. She is an experienced speaker on MRI safety topics, continues to work clinically to maintain her skills, and serves in key leadership roles with the International Board of MR Safety, including Secretary Treasurer and Chair of the MR Safety Officer Exam Specification Committee.

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WEBINAR 3: MRI POLICIES THAT WORK

DATE: 30 JULY 2026 TIME: 10:00 CT (15:00 UTC)

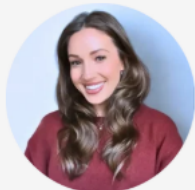
FEATURED SPEAKERS



TOBIAS GILK, MRSO, MRSE

Tobias "Toby" Gilk has become something of an authority on MRI safety practices. He is one of the founding board members of the IBMRS (formerly ABMRS), and previously served as the organization's Chair.

He holds both MRSO and MRSE credentials. He has twice served on the ACR's MRI Safety Committee, contributing to three of their publications, has his own consulting firm, and is a co-author of The Technologist's MRI Safety Handbook. And just a few weeks ago, he ran a workshop on developing MRI safety policies at the AHRA annual meeting.



KELLYE CHIA, RT(R)(MR), MRSO(MRSC™), MRSE(MRSC™)

Kellye Chia is Director of Clinical Success and MRI Safety at NordInsight, as well as an MRI safety consultant, educator, and expert witness. She has extensive experience in clinical MRI practice, safety leadership, and industry innovation.

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WEBINAR

Building a Safer MRI Environment:

From Screening to Emergency Response

✓ Safety First. | 👤 Every Patient. | ✓ Every Time.



DATE

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(Kuwait Time)



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SPEAKER

JIGI CHERIAN

Global MRI Clinical Education Specialist –
Siemens Healthineers
Clinical Applications Manager – SUMC, Kuwait



<https://mrimed.com/blogs/news/mri-safety-week-2026-recap?srsltid=AfmBOooRRo1I6Jjj1q2crtgU7skoNfhvesl81piNzBmMhTFAhzUeERB7>



MRI Safety Week 2026 Recap — Key Takeaways And What's Next For Your Facility

June 15, 2026